

Fill in this information to identify the case:

Debtor Name LEWIS M. IRVING

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number: 19-13930 (AMC)

☐ Check if this is an amended filing

## Official Form 425C

### Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: D  
December

Date report filed: 01/17/2020  
MM / DD / YYYY

Line of business: CEMETERY

NAISC code: 812220

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: LEWIS M. IRVING

Original signature of responsible party \_\_\_\_\_

Printed name of responsible party LEWIS M. IRVING

#### 1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

**If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.**

	Yes	No	N/A
1. Did the business operate during the entire reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.**

10. Do you have any bank accounts open other than the DIP accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Debtor Name LEWIS M. IRVING

Case number 19-13930 (AMC)

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐

## 2. Summary of Cash Activity for All Accounts

### 19. Total opening balance of all accounts

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ 2,000.00

### 20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank; collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 18,263.16

### 21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 22,092.07

### 22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ (3,828.91)

### 23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ (1,828.91)

## 3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

### 24. Total payables

\$ \$ 1,400.00

(*Exhibit E*) Income Tax \$ 0 ☐

Property tax \$1,400.00

Debtor Name LEWIS M. IRVING

Case number 19-13930 (AMC)

#### 4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 0  
(Exhibit F)

#### 5. Employees

26. What was the number of employees when the case was filed? 0  
27. What is the number of employees as of the date of this monthly report? 0

#### 6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0  
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 15,000.00  
30. How much have you paid this month in other professional fees? \$ 0  
31. How much have you paid in total other professional fees since filing the case? \$ 0

#### 7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A Projected  Copy lines 35-37 from the previous month's report.	Column B Actual  Copy lines 20-22 of this report.	Column C Difference  Subtract Column B from Column A.
32. Cash receipts	\$ <u>14,000.00</u>	\$ <u>18,263.16</u>	\$ <u>4,263.16</u>
33. Cash disbursements	\$ <u>12,000.00</u>	\$ <u>22,092.07</u>	\$ <u>10,092.07</u>
34. Net cash flow	\$ <u>2,000.00</u>	\$ <u>( 3,828.91)</u>	\$ <u>(1,828.91)</u>
35. Total projected cash receipts for the next month:			\$ <u>14,000.00</u>
36. Total projected cash disbursements for the next month:			- \$ <u>12,000.00</u>
37. Total projected net cash flow for the next month:			= \$ <u>2,000.00</u>

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Case number 19-13930 (AMC)

## 8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.



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T STATEMENT OF ACCOUNT

000085298 01 AV 0.380 MTD01040122519420981 0055 11 07



LEWIS M IRVING  
DIP CASE 19-13930 EDPA  
278 THORNTON RD  
THORNTON PA 19371

Page: 1 of 2  
Statement Period: Nov 26 2019-Dec 25 2019  
Cust Ref #: 4351064070-039-T-###  
Primary Account #: [REDACTED]



### Chapter 11 Checking

LEWIS M IRVING  
DIP CASE 19-13930 EDPA

Account #: [REDACTED]

#### ACCOUNT SUMMARY

Beginning Balance	6,081.40	Average Collected Balance	5,705.74
Deposits	6,000.00	Interest Earned This Period	0.00
		Interest Paid Year-to-Date	0.00
* Checks Paid	7,579.69	Annual Percentage Yield Earned	0.00%
Electronic Payments	282.96	Days in Period	30
Ending Balance	4,218.75		

#### DAILY ACCOUNT ACTIVITY

##### Deposits

POSTING DATE	DESCRIPTION	AMOUNT
12/03	DEPOSIT	4,000.00
12/04	DEPOSIT	2,000.00
	Subtotal:	6,000.00

##### Checks Paid

DATE	SERIAL NO.	AMOUNT	DATE	SERIAL NO.	AMOUNT
12/04	156	2,400.00	12/10	161	2,075.77
12/12	157	72.60	12/10	162	1,747.50
12/13	158	20.00	12/10	163	319.39
12/09	160*	606.62	12/09	164	337.81
			Subtotal:		7,579.69

##### Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
12/09	ELECTRONIC CK PMT-ARC, ALLSTATE F&C INS CHECKPAYMT 159	227.96
12/10	DEBIT CARD PAYMENT, *****30050168855, AUT 120919 VISA DDA PUR NEW JERSEY E ZPASS 888 288 6865 * NJ	55.00
	Subtotal:	282.96

#### DAILY BALANCE SUMMARY

DATE	BALANCE	DATE	BALANCE
11/25	6,081.40	12/10	4,311.35
12/03	10,081.40	12/12	4,238.75
12/04	9,681.40	12/13	4,218.75
12/09	8,509.01		

Call 1-800-937-2000 for 24-hour Bank-by-Phone services or connect to [www.tdbank.com](http://www.tdbank.com)

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737-MTD01040121219418421



LEWIS M IRVING  
DIP CASE 19-13930 EDPA  
278 THORNTON RD  
THORNTON PA 19371

Page: 1 of 3  
Statement Period: Nov 12 2019-Dec 11 2019  
Cust Ref #: 4351064335-039-T-###  
Primary Account #: [REDACTED]

## Chapter 11 Checking

LEWIS M IRVING  
DIP CASE 19-13930 EDPA

Account # [REDACTED]

Beginning Balance	5,761.85	Average Collected Balance	8,620.48
Electronic Deposits	12,263.16	Interest Earned This Period	0.00
		Interest Paid Year-to-Date	0.00
Electronic Payments	1,966.26	Annual Percentage Yield Earned	0.00%
Ending Balance	16,058.75	Days in Period	30

### Electronic Deposits

POSTING DATE	DESCRIPTION	AMOUNT
11/12	DEBIT CARD CREDIT, *****30049599624, AUT 111119 VISA DDA REF THE HOME DEPOT 4121 GLEN MILLS * PA	91.49
12/02	VISA TRANSFER, *****30049599624, AUT 113019 VISA TRANSFER ALLSTATE INSURANCE COMPA VISA DIRECT * WI	12,171.67
	Subtotal:	12,263.16

### Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
11/12	DEBIT CARD PAYMENT, *****30049599624, AUT 110819 VISA DDA PUR ATT BILL PAYMENT 800 288 2020 * TX	285.86
11/12	DEBIT CARD PURCHASE, *****30049599624, AUT 110919 VISA DDA PUR THE HOME DEPOT 4121 GLEN MILLS * PA	150.00
11/12	DEBIT CARD PURCHASE, *****30049599624, AUT 110819 VISA DDA PUR IDL PROSVEN 1 OF 1 800 7439854 * CA	99.75
11/12	DEBIT POS, *****30049599624, AUT 111219 DDA PURCHASE WAL MART 3252 BOOTHWYN * PA	78.40
11/12	DEBIT CARD PURCHASE, *****30049599624, AUT 110919 VISA DDA PUR DICOSTANZA S QPS BOOTHWYN * PA	59.94
11/15	DEBIT POS, *****30049599624, AUT 111519 DDA PURCHASE CVS PHARMACY 04 04984 GLEN MILLS * PA	22.20
11/18	DEBIT POS, *****30049599624, AUT 111519 DDA PURCHASE COSTCO WHSE 1114 GLEN MILLS * PA	120.30
11/18	DEBIT POS, *****30049599624, AUT 111719 DDA PURCHASE COSTCO GAS 1114 GLEN MILLS * PA	45.70
11/18	DEBIT POS, *****30049599624, AUT 111819 DDA PURCHASE COSTCO GAS 1114 GLEN MILLS * PA	32.20
11/19	DEBIT CARD PURCHASE, *****30049599624, AUT 111719 VISA DDA PUR SOUTHWES 526214235096 800 435 9792 * TX	61.90
11/21	DEBIT CARD PURCHASE, *****30049599624, AUT 112019 VISA DDA PUR SQ MARTEL ENTERPRI ASTON * PA	130.50